

ADMINISTRATIVE	OBTS NUMBER		ARREST/NOTICE TO APPEAR										1. Arrest 2. N.T.A.		3. Request for Warrant 4. Request for Capias		3	Juvenile	No
	Agency ORI Number FL0501700		Agency Name Jupiter Police Department										Agency Report Number 54 - 19 - 000818						
	Charge Type: Check as many as apply <input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other										Weapons Seized/Type 1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>								
	Location of Arrest (Including Name of Business)										Location of Offense (Business Name/Address) Orchids of Asia 103 S US Hwy 1 C2 Jupiter, FL 33477						Date of Offense 1/19/2019		
DEFENDANT	Date of Arrest		Time of Arrest		Booking Date		Booking Time		Jail Date		Jail Time		Fingerprinted By: <input type="checkbox"/> Identification <input type="checkbox"/> AFIS <input type="checkbox"/> Criminal						
	Location of Vehicle				Other Local Number		FDLE Number		DOC Number		FBI Number								
	Name (Last, First Middle) Goering, Timothy Robert										Alias (Name, DOB, Soc. Sec. #, Etc.)								
	Race W - White I - American Indian B - Black O - Oriental/Asian		W	Sex M		Date of Birth 07/21/1966		Height 5' 9"		Weight 180		Eye Color blu		Hair Color Blonde		Complexion med		Build med	
CO-DEF.	Scars, Marks, Tattoos, Unique Physical Features (Location, Type, Description) TT: Eagle/Globe/Anchor on left shoulder										Marital Status		Religion		Indication of: Alcohol Influence <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Un. Drug Influence <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
	Local Address (Street, Apt. Number)				(City)		(State)		(Zip)		Phone ()		Residence Type: 1. City 3. Florida 2. County 4. Out of State						
	Permanent Address (Street, Apt. Number) 162 Via Catalunha				(City) Jupiter		(State) FL		(Zip) 33458		Phone (561)427-3945		Address Source FL Driver's License						
	Business Address (Name, Street)				(City)		(State)		(Zip)		Phone ()		Occupation						
JUVENILE	D/L Number G652816662610		D/L State FL		Soc. Sec. Number <div style="background-color: black; color: black;">[REDACTED]</div>		INS Number		Place of Birth , Germany		Citizenship U.S.								
	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felory <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile						
	Co-Defendant Name (Last, First, Middle)						Race		Sex		Date of Birth		<input type="checkbox"/> 1. Arrested <input type="checkbox"/> 3. Felory <input type="checkbox"/> 2. At Large <input type="checkbox"/> 4. Misdemeanor <input type="checkbox"/> 5. Juvenile						
	<input type="checkbox"/> 1. Parent <input type="checkbox"/> 2. Legal Custodian <input type="checkbox"/> 3. Other:		Name (Last, First, Middle)										Residence Phone ()						
NOTICE TO APPEAR	Address (Street, Apt. Number)				(City)		(State)		(Zip)		Business Phone ()								
	Notified By: (Name)				Date		Time		Juvenile Disposition 1. Handled/Processed within Dept. and Released 2. TOT HRS/DCF 3. Incarcerated										
	Released To: (Name)				Relationship				Date		Time								
	The above address was provided by the defendant and/or defendant's parent/guardian. The child and/or parent/guardian was told to keep the Juvenile Division Office (Phone 561-355-7200) informed of any change of address: Yes, by: (Name) No: (Reason)										School Attended		Grade						
CHARGE	Property Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Description of Property								Value of Property								
	Activity S. Sell R. Smuggle K. Dispense/Distribute M. Manufacture Z. Other N. N/A B. Buy D. Deliver Distribute Produce/Cultivate P. Possess T. Traffic E. Use		Type N. N/A B. Barbiturate H. Hallucinogen P. Paraphernalia/ U. Unknown A. Amphetamine C. Cocaine M. Marijuana Equipment Z. Other E. Heroin O. Opium/Deriv. S. Synthetic		Counts 1		<input checked="" type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number 796.07(5)(a)(1)		Violation of ORD #								
	Activity N		Drug Type N		Amount/Unit		Offense # 19-000818		Warrant/Capias Number		Bond								
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number		Violation of ORD #										
CHARGE	Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond								
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number		Violation of ORD #										
	Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond								
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number		Violation of ORD #										
CHARGE	Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond								
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number		Violation of ORD #										
	Activity		Drug Type		Amount/Unit		Offense #		Warrant/Capias Number		Bond								
	Charge Description		Counts		<input type="checkbox"/> FSS <input type="checkbox"/> ORD		Statute Violation Number		Violation of ORD #										
ADMIN	<input checked="" type="checkbox"/> Instruction No. 1 Mandatory Appearance in Court		Location (Court, Room Number, Address) North County Courthouse, 3188 PGA Blvd., Palm Beach Gardens, FL 33410																
			Court Date and Time Month Day Year Time <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.																
	I AGREE TO APPEAR AT THE TIME AND PLACE DESIGNATED TO ANSWER THE OFFENSE CHARGED OR TO PAY THE FINE SUBSCRIBED. I UNDERSTAND THAT SHOULD I WILLFULLY FAIL TO APPEAR BEFORE THE COURT AS REQUIRED BY THIS NOTICE TO APPEAR, THAT I MAY BE HELD IN CONTEMPT OF COURT AND A WARRANT FOR MY ARREST SHALL BE ISSUED.																		
	Signature of Defendant (or Juvenile and Parent/Custodian)																		
ADMIN	HOLD for other Agency Name:		Signature of Arresting Officer X				Date Signed 1/12/11				Name Verification (Printed by Prisoner) (PRINT)								
	<input type="checkbox"/> Dangerous <input type="checkbox"/> Resisted Arrest <input type="checkbox"/> Suicidal <input type="checkbox"/> Other:		Name of Arresting Officer (Print) Det. A. Sharp #412				I.D.#				PAGE								
	Intake Deputy I.D.#		Pouch #		Transporting Officer I.D.#		Agency		Witness here if subject signed with an "X"										

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AGENCY - 2 COPIES

DEFENDANT - 1 COPY

OBTS Number		PROBABLE CAUSE AFFIDAVIT		1. Arrest 2. N.T.A.	3. Request for Warrant 4. Request for Capias	3	Juvenile	No
ADMIN	Agency ORI Number FL0501700		Agency Name JUPITER POLICE DEPARTMENT		Agency Report Number 54-19-000818			
	Charge Type: Check as many as apply.		<input type="checkbox"/> 1. Felony <input checked="" type="checkbox"/> 3. Misdemeanor <input type="checkbox"/> 5. Ordinance <input type="checkbox"/> 2. Traffic Felony <input type="checkbox"/> 4. Traffic Misdemeanor <input type="checkbox"/> 6. Other		Special Notes:			
DEF	Name (Last, First, Middle) Goering, Timothy Robert					Alias		
	Victim's Name (Last, First, Middle) State of Florida					Race		Date of Birth
VICTIM	Local Address (Street, Apt. Number) 210 Military Trail, Jupiter, Florida 33458		(City)	(State)	(Zip)	Phone (561) 746-6201		Address Source
	Business Address (Name, Street)		(City)	(State)	(Zip)	Phone ()		Occupation
PROBABLE CAUSE STATEMENT	The undersigned certifies and swears that he/she has just and reasonable grounds to believe, and does believe the above named Defendant committed the following violation of law. The person taken into custody....							
	<div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> committed the below acts in my presence. <input type="checkbox"/> confessed to _____ admitting to the below facts. </div> <div> <input type="checkbox"/> was observed by _____ who told _____ that he/she saw the arrested person commit the below acts. <input checked="" type="checkbox"/> was found to have committed the below acts, resulting from my (described) investigation. </div> </div>							
On the <u>19th</u> day of <u>January</u> , <u>2019</u> at <u>1501</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M. (Specifically include facts constituting cause for arrest)								

In October of 2018 members of the Jupiter Police Department began an investigation into criminal activity occurring at Orchids of Asia Day Spa, located at 103 S. US Highway 1 C2 in Jupiter. On January 17, 2019, covert surveillance equipment was installed in Orchids of Asia Day Spa pursuant to a sneak and peek warrant. The following narrative is a description of the illicit activity that took place.

Room Surveillance: Det. B. Jordan #405
Room Camera # JPPD Cam 4

January 19th, 2019, 1501hrs – 1600hrs

Defendant: Timothy Robert Goering, 7/21/66, blue t-shirt, gray shorts, blue & white ball cap, FL# UQF5T.

On Saturday, January 19th, 2019, video surveillance was conducted at the target business. At approximately 1501hrs, Goering entered the business, approached the front desk, and paid an Asian female, previously identified as [REDACTED] for services with cash, which was captured on JPPD Cam 5. Goering entered a room, designated as JPPD Cam 4, completely undressed, and lay face down on the table. Goering had an eagle, globe, and anchor tattoo on his left shoulder. [REDACTED] entered the room and began massaging Goering and soon after, dimmed the lights. While massaging Goering, [REDACTED] is seen touching Goering's genitals. Goering turned over onto his back, and lay face up. At approximately 1545hrs, [REDACTED] began manually manipulating Goering's genitals. Shortly after, [REDACTED] wiped off Goering's genital region with white towels. At approximately 1559hrs, Goering got dressed and left the room and exited the business.

Surveillance on scene: At approximately 1501hrs, a white male, identified as Timothy Robert Goering (W/M 7/21/66), entered the establishment through the front door. At approximately 1600hrs, the Goering exited the front door. Detective B. Panczak #411 followed the male to his vehicle and obtained his vehicle tag number, Florida Marine Corps tag # UQF5T. A traffic stop was conducted on the vehicle by Officer Kimbark #368. The male was positively identified by Florida driver's license as Timothy Robert Goering (W/M, 7/21/66) the sole occupant and registrant of the vehicle.

Based on the aforementioned investigation, I have probable cause to believe Timothy Robert Goering (W/M 7/21/66) did solicit, induce, entice, or procure another to commit prostitution, lewdness, or assignation, contrary to Florida Statute 796.07(5)(a)1.

ADMIN.	SWORN AND SUBSCRIBED BEFORE ME		 NOTARY PUBLIC/CLERK OF THE COURT/POLICE OFFICER		 SIGNATURE OF THE ARRESTING/INVESTIGATING OFFICER	
	February 22, 2019		Det. A. Sharp #412		NAME OF OFFICER (PLEASE PRINT)	
	DATE		February 22, 2019		DATE	

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